

**DETERMINATION AND FINDINGS  
FOR A  
SOLE SOURCE PROCUREMENT**

<b>CONTRACT NO:</b>	CW 21893
<b>CAPTION:</b>	Geo-Spatial analysis function for NEDSS Base System
<b>PROPOSED CONTRACTOR:</b>	Inductive Health Informatics
<b>PROGRAM AGENCY:</b>	Department of Health (DOH)

**FINDINGS**

**1. AUTHORIZATION:**

D.C. Official Code §2-354.04, 27 DCMR 1304, 1700 and 1701

**2. MINIMUM NEED:**

The District of Columbia Office of Contracting and Procurement, on behalf of the District Department of the Health (“District”) is seeking a contractor to develop a geo-Spatial analysis functions for the NEDSS Base System (NBS).

**3. ESTIMATED REASONABLE PRICE:**

\$82,000.00

**4. FACTS WHICH JUSTIFY SOLE SOURCE PROCUREMENT:**

In December 2012, the District of Columbia Department of Health (DC DOH), Center for Policy, Planning and Evaluation (CPPE), Division of Epidemiology –Disease Surveillance and Investigation (DE-DSI) received funding from the Centers for Disease Control and Prevention to develop a geo-spatial analysis function for the NEDSS Base System (NBS). The proposed project involves deep integration of the geo-coding layer within the NBS, which is an undocumented interface point requiring specialized knowledge to utilize. Extensive knowledge and experience with the NBS data model is required to develop this geo-coding application logic and associated reporting modules.

NBS has received continued contractor support from SAIC since 2011. In October 2012, DE-DSI consulted with SAIC to discuss possibilities of integrating geo-Spatial analysis and reporting function in the NBS. The support contractor, SAIC has only been involved in maintaining existing modules. Interface points and integrating layers of the NBS are undocumented thus making it extremely difficult for regular contractors to create specialized modules. The unique situation led to a search for skill sets which were associated in creating the NBS. Specifically, the search was conducted between 02/16/2013 and 03/31/2013.

The search focused on identifying firms with capabilities in three areas that would be required to successfully implement the scope of this project:

1. Experience in the implementation of geocoding and spatial analysis
2. Subject Matter Expertise in NBS business processes, technical architecture, data models, and reporting sub-systems
3. Custom development and integration services focused on extending the NBS

The search was conducted through 1) outreach to the NBS user community at the NBS User Group meetings, 2) reviewing existing contractors doing business with Division of Epidemiology – Disease Surveillance and Investigation (DE-DSI), 3) outreach to Office of the Chief Technology Officer (OCTO) District of Columbia Geographic Information System (DC GIS) team, 4) and by conducting online searches using relevant key terms.

The results of this search are detailed below:

1. **NBS community outreach** showed that only 2 states had implemented geocoding and visualization capabilities within the NBS. Both were more limited in features and complexity compared to the DC GIS integration requirements. Neither state utilized contractor resources to implement this work, instead relying on internal expert staff.
2. **Review of existing contractors** doing business with DE-DSI did not identify any contractors with the required capabilities. The only contractor with experience indicated that they did not have the required experience to implement this GIS integration.
3. **OCTO DC GIS outreach** identified District resources with extensive experience in geocoding and spatial analysis. However, these resources did not have any of the other required skillsets, including experience with deep integration with the NBS.
4. **Conducting online searches** using key terms such as *NBS*, *geocoding*, *spatial*, *NEDSS*, *public health informatics* returned a variety of firms.
  - Those firms returned based on *geocoding* and *spatial* key terms were typically experienced in Commercial off the Shelf (COTS) and Software as a Service (SaaS) geocoding and spatial solutions (e.g., ESRI®, Google Maps®, CloudMade®, etc.) but these firms did not have any experience in the NBS nor did these firms market professional services that target the NBS.
  - Key word searches using *NBS* and *NEDSS* returned one firm – InductiveHealth Informatics – that marketed offerings in alignment to the required capabilities.
  - Key word searches using terms such as *public health informatics* did identify firms (e.g., HLN Consulting, Public Health Practice, etc.). However, these firms do not market expertise in the capabilities required for this project.

Based on the search process, the Division engaged in discussions with Inductive Health Informatics to better understand the marketed capabilities against the project requirements. Through this process, the Division found that InductiveHealth was deeply involved in the design, development, and implementation of the NBS, including its geocoding and GIS feature set. These GIS features have since been retired from the NBS which is why a custom integration is required.

Other contractors have supported the NBS, but only InductiveHealth has experience with all of the required components to successfully implement a GIS integration with the District's MAR and GIS visualization tools. These components include the NBS Operational Data Store (transactional database containing address data), technical architecture (J2EE development and JBoss Application Server), and Reporting module (SAS® and JavaServer Pages). This deep expertise will allow a solution to implemented that is detached from the main NBS application to ensure the District can continue to install new NBS releases provided by the NBS.

DOC DOH is required to receive advanced authorization for projects paid with CDC funds, including approval of the selected contractor. The potential contractor must support utilization of the NBS product and must have extensive experience in providing services in the direct support of disease surveillance and reporting system.

**5. CERTIFICATION BY AGENCY HEAD:**

I hereby certify that the above findings are true, correct and complete.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dr. Saul Levin  
Director, Department of Health

**6. CERTIFICATION BY CONTRACTING OFFICER:**

I have reviewed the above findings and certify that they are sufficient to justify the use of the sole source method of procurement under the cited authority. I certify that the notice of intent to award a sole source contract was published in accordance with 27 DCMR 1304 and that [no response was received. I recommend that the Chief Procurement Officer approve the use of the sole source procurement method for this proposed contract.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Priscilla Mack  
Contracting Officer

### **DETERMINATION**

Based on the above findings and in accordance with the cited authority, I hereby determine that it is not feasible or practical to invoke the competitive solicitation process under either Section 402 or 403 of the District of Columbia Procurement Practices Reform Act of 2010 (D.C. Law 18-371; D.C. Official Code § 2-354.02 or 2-354.03). Accordingly, I determine that the District is justified in using the sole source method of procurement.

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Date

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James D. Staton, Jr.  
Chief Procurement Officer

## **INSTRUCTIONS FOR THE D & F FOR A SOLE SOURCE PROCUREMENT**

### **1. AUTHORIZATION**

D.C. Official Code §2-354.04; There is only one source for the required goods or services. Cite 27 DCMR 1304 and 27 DCMR 1700 and 1701 as applicable.

### **2. MINIMUM NEED**

Describe the program agency's requirement for a stated minimum need (scope of work) and time frame within which work must be performed. List in detail the precise nature and scope of the services or supplies required. The time frame must be justified in detail when sole source justification is time based.

### **3. ESTIMATED REASONABLE PRICE**

The estimated price of the contract (the amount the contractor is anticipated to receive).

### **4. FACTS WHICH JUSTIFY SOLE SOURCE PROCUREMENT**

Indicate the facts which establish that there is only one available source. You **must** include the unique nature of the proposed procurement, the proposed contractor's unique qualifications or any other factors that qualify the proposed contractor as a sole source for the procurement.

You **must** include a description of the market survey or the reason why a market survey was not conducted.

You **must** include a list of the potential sources that you contacted, and if none a discussion of why not. Discuss which potential sources expressed an interest in the procurement and describe their interest and why they were rejected.

### **5. CERTIFICATION BY AGENCY HEAD**

The head of the program agency, by signature, certifies factually the findings.

### **6. CONTRACTING OFFICER CERTIFICATION**

The contracting officer, by signature, certifies (1) factually the findings and recommends that an official with written delegated authority determines, by signature, that the use of the sole source procurement method is justified, and (2) that the notice of intent to award a sole source contract was published and that no viable response was received. The contracting officer must state that either no response was received or briefly explain why a response was not viable.

## **7. DETERMINATION**

An official with written delegated authority determines, by signature, that the use of the sole source procurement method is justified. The Chief Procurement Officer, or an official delegated authority in writing to sign on behalf of the Chief Procurement Officer, must sign the determination if the procurement is in excess of five thousand dollars (\$5,000).

### **INSTRUCTIONS FOR THE D & F FOR A SOLE SOURCE EXTENSION OR RENEWAL PROCUREMENT**

Use the same D&F template with the following changes:

1. Replace the heading with:

#### **DETERMINATION AND FINDINGS FOR A SOLE SOURCE EXTENSION OF CONTRACT**

2. Replace the Authorization with:

1. **AUTHORIZATION:**

D.C. Official Code §2-354.04, 27 DCMR 1304, 1700, 1701 and 2005.6(b)